

Bristol City Council

Minutes of the Health and Wellbeing Board

Wednesday 19 August 2015

Health and Wellbeing Board Members present:

George Ferguson - Elected Mayor of Bristol and Co-Chair of the Board Dr Martin Jones – Chair, Bristol Clinical Commissioning Group (Bristol CCG) and Co-Chair of the Board (**Chair for this meeting**)

Alison Comley - Strategic Director: Neighbourhoods, Bristol City Council (BCC)

John Readman - Strategic Director: People, BCC

Becky Pollard - Director of Public Health, BCC

Jill Shepherd - Chief Officer, Bristol CCG)

Councillor Claire Hiscott

Councillor Brenda Massey

Elaine Flint, Voluntary and Community Sector representative

Linda Prosser, NHS England North Somerset, Somerset and South Gloucestershire

Ellen Devine, Service Co-ordinator, Healthwatch Bristol

Support Officers in attendance:

Kathy Eastwood – Service Manager, Health Strategy (Supporting the Board); Suzanne Ogborne – Democratic Services Officer; Stephen Hynd - Head of Mayor's Office, Bristol City Council.

Others in attendance:

Netta Meadows, Service Director – People, Bristol City Council (BCC); Leon Goddard, Strategic Commissioning Manager, BCC; Judith Polton, Bristol Healthy Living Pharmacy Project Manager; Barbara Coleman, Service Director: Public Health Commissioning, BCC; Bridget James, Head of Quality, Bristol Clinical Commissioning Group; Mike Campbell in relation to his public forum statement regarding Children's Community Health Services Re-commissioning; Ella Marshall and Sophie Giltinan Bristol members of the UK Youth Parliament; Micaela Briscoe and Elise Brindley Bristol City Youth Council members; Rebecca Cross, Service Manager: Joint Commissioning (Children), BCC.

AGENDA PART A PUBLIC FORUM AND STANDARD ITEMS

1. Public Forum

A statement had been received from Mike Campbell relating to Children's Community Health Services Re-commissioning which had been discussed at the Health and Wellbeing Board's 17 June 2015 meeting and noted in the minutes from this meeting (see page 13 of the papers, item 6). He also circulated a dossier on Virgin Care.

Mike Campbell attended the meeting and summarised his statement.

In addition, he asked three rhetorical questions:

- 1. Is Bristol CCG acting as a local leader in relation to the Children's Community Health Services re-commissioning?
- 2. Has the public been consulted on the shortlisting of the providers?
- 3. Are budgets between partners being pooled effectively?

The Chair, Dr Martin Jones, commented that he would be given a written response to his questions. He also explained that there are rules and regulations and a process to be followed in relation to the re-commissioning. These have been followed.

ACTION: Bristol CCG to give a written response to Mike Campbell's statement and his questions

2. Declarations of Interest

There were no declarations of interest.

3. Welcome, Apologies for Absence and Substitutions

Dr Martin Jones (Co-chair) welcomed all present to the meeting.

Apologies had been received from Nicola Yates, City Director, Bristol City Council (BCC); Steve Davies – Vice Chair South Bristol Locality Group, Bristol Clinical Commissioning Group (Bristol CCG); Richard Laver, Chair, North & West Locality group, Bristol CCG; Ewan Cameron – Chair, Inner City & East Locality Group, Bristol CCG; Councillor Glenise Morgan; Keith Sinclair, HealthWatch (Carers Support Centre); Councillor Daniella Radice.

4. Minutes of the Meeting held on 17 June 2015

AGREED – that the Minutes of the meeting held on 17 June 2015 be agreed as a correct record and signed by the Chair.



Matters arising from the minutes - Children's Community Health Services Recommissioning – there is an action for Judith Brown, Operations Manager, to advise when an interim provider has been confirmed. This action has been carried forward.

AGENDA PART B: ANY KEY DECISIONS TO BE TAKEN BY THE MAYOR

5. The Mayor considered a key decision in respect of Care Home Re-commissioning.

Netta Meadows, Service Director – People, introduced this item and explained that the re-commissioning is in respect of two types of care homes: residential and nursing. She mentioned that the contract is significant in terms of value – over £60m worth of services.

She then handed over to Leon Goddard, Strategic Commissioning Manager, to explain the detail. (A copy of the accompanying slide presentation has been placed in the official Minute Book). Leon Goddard highlighted the following key points:

- (a) It is important to understand that quality is key any care home would need to go through a formal process
- (b) The Bristol Standard for care home quality will be awarded to care homes which are successful at the first stage. The quality must be maintained and care homes need to demonstrate that they meet the standard.
- (c) There will be certain block contracts
- (d) Spot contracts will be underpinned by a dynamic purchasing process. This will ensure value for money.

ACTION: The HWB to be given an update on the Bristol Standard – Netta Meadows, Service Director: People

DECISION TAKEN BY THE MAYOR:

- 1.1 To approve the introduction of a 'Bristol Standard' for care home quality.
- 1.2 To approve the introduction of the care home commissioning model proposed in this report.
- 1.3 To delegate authority to the Strategic Director People to implement the commissioning model described in this report.
- 1.4 To delegate authority to the Strategic Director People and Section 151 (joint approval) to award contracts to care home providers as part of the implementation of this proposed commissioning model.

AGENDA PART C: BOARD ITEMS

6. Bristol City Youth Council Campaigns

The Chair welcomed Ella Marshall and Sophie Giltinan, Bristol members of the UK Youth Parliament together with Micaela Briscoe and Elise Brindley, Bristol City Youth Council members (supported by Rebecca Cross, Service Manager: Joint Commissioning (Children)).

Ella Marshall explained that in February 2015 members of the Bristol City Youth Council (BCYC) were elected by a record number of 10,379 voters. She explained how the BCYC had put together its Manifesto (see Page 131 of the papers) and outlined the three priorities:

- (i) Healthy Body, Healthy Mind in particular to ensure equal recognition for both the mental and physical health of young people
- (ii) European Green Capital to run a high profile outdoor event targeted mainly at young people to promote the city's Green Capital status. Also to meet with FirstBus and the Council's transport team to look at making transport more punctual and reliable in and around Bristol
- (iii) Neighbourhoods to give young people opportunities to take an active role in their communities

She also mentioned the Youth Parliament priorities which are Curriculum for Life and improving Access to Mental Health support and education. The Youth Mayors priority is Working Experience and Careers Advice.

The following key points were highlighted:

- (a) Healthy body, healthy mind campaign Elise Brindley explained that:
 - BCYC would like to appoint student ambassadors in every school and provide early help for young people suffering from mental health issues. This would be through a training and selection programme for ambassadors to be up and running by February 2017
 - There is also a plan to hold a teacher training day to educate teachers about young people's mental health so that they can include information about mental health in their lessons and also to provide support for young people in crisis.
 - As an aid to promote good mental health in schools, there is an intention to producer posters and short videos to be shown in schools
- (b) Sophie Giltinan mentioned that the UK Youth Parliament debate various issues regarding young people in the House of Commons.

- (c) Ella Marshall outlined the ambitious vision to host 2 weeks of events with an ethos to create a positive discussion around mental health. She explained that this is in the planning stages but would include a fundraising gig, a panel discussion with speakers and the hosting of creative events such as group meditation, art therapy and a workshop to discuss stigma.
- (d) The team are looking for a venue, funding, contacts, creative ideas etc. Any help that the HWB can give in this respect would be much appreciated.
- (e) The Mayor suggested that the team speak to him and Bristol City Council regarding venues.

The following comments were made:

- (f) Elaine Flint mentioned the National Time to Change campaign which works with schools.
- (g) Rebecca Cross mentioned Mind the Gap which is a piece of research into the accessibility of mental health services in Bristol (A copy of the research has been placed in the official Minute Book). This will be submitted, as part of an overall report, to Alistair Burt MP, Minister of State for Community and Social care. It is a requirement that the HWB nominate someone to sign this off. ACTION: It was agreed that Dr Martin Jones be the nominated lead to sign this.
- (h) Becky Pollard mentioned that Public Health has a whole team working with schools around health and wellbeing. This would be a good opportunity to work with the Youth Council. Public Health's five ways to wellbeing is an effective educational resource which could be made available.
- (i) George Ferguson thanked the BCYC for reinforcing many of the priorities.
- (j) John Readman commented that all partners would like to be involved in the business plan. The uniqueness is that it is young people led and HWB supported.
- (k) Martin Jones commented that Kathy Eastwood and Rebecca Cross are the links to the HWB.

The Chair thanked the Youth Council for this report and update.

7. Healthwatch

This report was introduced by Ellen Devine, Healthwatch Bristol Service Co-ordinator (Copies of the accompanying slide presentation were circulated at the meeting and a copy has been placed in the official Minute Book). Ellen Devine outlined the role of HealthWatch which is a strong, independent voice for children, young people and adults in health and social care. Healthwatch are keen to do more work in the area of social care services. Healthwatch in Bristol is delivered by The Care Forum and the aim is to work with seldom heard communities, for example people with learning

disabilities, dementia, english as a second language or no english and people who do not have access to the internet.

She explained that there are a range of different volunteering roles - a Healthwatch champion role, someone who is part of a community group, enter and view volunteers who go into care settings and do enter and view visits and a research volunteering role. She commented that Healthwatch works with Healthwatch England, so it has a view of care across the whole country.

Healthwatch helps individuals and improves services. With regard to helping individuals, Ellen Devine mentioned a lady with cancer who got in touch who was using the BRI. Healthwatch recorded her feedback but was also able to signpost her to the next steps (eg PALS service; WellAware and signedposted her to support groups for people with cancer where she lives). Also, if someone needed additional support, Healthwatch could put them in touch with advocacy services.

In relation to improving services, she explained that Healthwatch can identify where things are happening more than once from the feedback received. Healthwatch produce quarterly reports, have a slot on a radio show at BCFM once a month and up-to-date information is available on their website. Ellen Devine asked the HWB to let her know if the radio show slot could usefully feature the HWB.

In relation to the key trends in the feedback gathered by Healthwatch between April and June 2015, Ellen Devine highlighted the following issues:

- (a) Communication is a key theme whether it be between staff and patients; individual staff on a ward or between services. This is particularly in relation to mental health services
- (b) Difficulty access services, in particular getting appointments with GPs. Feedback shows that people prefer on-line booking services so they can see which doctors are available. They do not like explaining to a receptionist why they want an appointment.
 - Dr Martin Jones commented that all GP practices in Bristol can offer online appointments and on-line prescriptions.
- (c) Quality of treatment and services, in particular the compassion of health professionals
- (d) Callington Road Bus service there has been lots of concern in relation to bus services offered to Callington Road Hospital, which is a mental health hospital. The hospital bus service was cancelled earlier this year. AWP said, when they cancelled it, that FirstBus would still continue with its local bus service via the hospital (the No. 36), however that bus service was also cancelled. ACTION: The Chair confirmed that the HWB would write to FirstBus in relation to this service.

Ellen Devine explained that Healthwatch's topic for this quarter (April-June) is Mental Health and Wellbeing. She explained that Healthwatch's representatives spoke to lots of different groups and this identified the importance of: early intervention support, children's interpretation of mental health vs physical health, that it is not just older people who can feel lonely, the importance of education, the alternatives to medication and the need for shorter waiting times for mental health services.

Ellen Devine suggested that she brings along a volunteer to HWB meetings. She also felt that it would be useful if Healthwatch and the Health & Wellbeing Board worked together on engagement with the public. She also mentioned Healthwatch's next Open Advisory Group meeting is on 30 September 2015 to which board members are invited. Kathy Eastwood suggested that she meet with Ellen Devine outside of the board meeting to discuss realistic options.

ACTION: Ellen Devine/Kathy Eastwood

The chair thanked Ellen Devine for her report and presentation.

8. Healthy Living Pharmacy (HLP) Pilot

This item was introduced by Judith Polton, Bristol Healthy Living Pharmacy Project Manager (copies of the slide presentation were circulated at the meeting and a copy has been placed in the official Minute Book).

Judith Polton highlighted a few facts and figures in relation to community pharmacies:

- There are 11,500 community pharmacies in England
- An estimated 1.8m people visit a community pharmacy every day in this country
- On average people visit a pharmacy 16 times a year for health related issues.
- 84% of the adult population visit a pharmacy each year
- The most frequent users are female

She explained that pharmacies have the advantage of being a non-clinical environment, a person can be anonymous, there is privacy in the consultation room, anyone can walk into any pharmacy in the country, they are accessible without an appointment and in some cases they are more accessible than surgeries; they can deliver some services including flu jabs and supporting stop smoking services and they support care homes with medication as well as providing medicine in packs. She explained that they often see the same people throughout their lives and can build good relationships with them.

A healthy living pharmacy (HLP) differs from a usual pharmacy in that a HLP will look for any opportunity to talk about healthy living on a range of health issues. It also engages with the local community and other health and social care professionals and can also signpost the public to other appropriate services. In the future its commissioned services could include social prescribing referrals, full weight management service, diabetes/blood pressure checks, vascular health checks, mole clinics, exercise referrals and NHS health checks.

Bristol's Healthy Living Pharmacies were launched in March and Healthy Living Champions have been coaching their teams to become proactive. They have already successfully supported Men's Health Week, with Old School Pharmacy signing up 22 men to the Men's Health scheme and Bedminster Pharmacy signing up three men to quit smoking on the first day of the promotion.

The following comments were made:

- (a) Ellen Devine asked Judith Polton for a list of the 12 HLP pharmacies
- (b) Claire Hiscott commented that what is brilliant about this is that pharmacies are more accessible and likely to capture the majority of the population.
 Moving more towards prevention is going to help everybody in the long term.
 And crucially, appointments do not need to be made.
- (c) Becky Pollard pointed out that the Better Care Bristol programme is keen to continue its dialogue with Healthy Living Pharmacies

The chair thanked Judith Polton for her verbal report.

9. Alcohol Misuse – Next steps following the summit

This item was introduced by Dr Martin Jones, Chair, Bristol Clinical Commissioning Group. He explained that this report follows the Alcohol Misuse Summit held on 16 July 2015 at MShed. The event was very well attended with a range of participants involved in this area of work and the conversations between the participants were widespread and fascinating. He commented that there is a passion to take forward this work with a short life working group, with its first meeting being in October. The HWB will oversee the work.

AGREED: To take forward the recommendations in the report.

ACTION: Kathy Eastwood

10. Sexual Health Services Re-commissioning

This report was introduced by Barbara Coleman, Service Director: Public Health Commissioning, Bristol City Council. (Copies of the accompanying slide presentation were circulated at the meeting and a copy has been placed in the official Minute Book).

Barbara Coleman explained how Public Health will approach the re-commissioning of sexual health services and commented that this forms part of the first consultation on the Bristol Health Commissioning Plan (see Appendix B, page 157 of the papers).

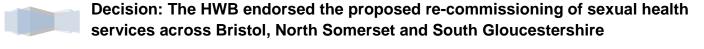
The following key points were highlighted:

- (a) Bristol is spending about 20% of the current public health grant on sexual health services which is in line with other core cities
- (b) There are a number of commissioners involved in the re-procurement, with Bristol acting as lead commissioner
- (c) Spend is just under £9,400,000
- (d) Barbara Coleman explained that she is looking for endorsement from the HWB. The team need to bring together all parties and draw up the service specifications and then go out for full consultation in November 2015 to January 2016
- (e) Barbara will report to the 21 October HWB meeting with the draft service specifications
- (f) The new service(s) are due to commence in April 2017

The following comments were made:

- (i) Dr Martin Jones highlighted that primary care will want to be involved in helping generate the model. Barbara Coleman explained that her team are liaising with GP practice forums and that a CCG seminar was planned in the Autumn to share early thinking with GP colleagues
- (ii) Claire Hiscott asked whether reducing the number of contracts will reduce the accessibility? It was confirmed that the reduction in the number of contracts will not negatively impact on access to services but streamline the contracting process
- (iii) Ellen Devine commented in relation to the public consultation what are the plans? Barbara Coleman explained that there will be a website which is accessible to young people and the public.
- (iv) Elaine Flint asked whether this will include the voluntary sector?
- (v) Becky Pollard explained that a mapping exercise is being undertaken in relation to groups that will be consulted with and this will include youth councils and schools to ensure that they will have a chance to be involved in the consultation

The chair noted that the Health and Wellbeing Board should be leading on the recommissioning and not just a consultee. He thanked Barbara Coleman for her report.



ACTION: Barbara Coleman to report on the draft service specifications to the HWB's 21 October meeting

11. NHS Quality Premium

This report was introduced by Bridget James, Head of Quality, Bristol CCG. She explained that the purpose of this report was to outline to the HWB the chosen options for Quality Premiums for 2015/16 by Bristol Clinical Commissioning Group. These are outlined in Appendix 1 to the report. She explained that formal approval of these was agreed at the Quality and Governance Committee and these have now been submitted to NHS England.

The metrics have been agreed for each Quality Premium and quarterly monitoring will be undertaken. She explained how the quality premium works.

The following comments were made:

- (a) Becky Pollard explained that Public Health had provided advice around targets and commented that it is in her team's interests for the CCG to hit the targets. She also commented that she is keen to understand the actions plans that sit behind the chosen options.
- (b) Martin Jones explained that he would be interested to see the narrative behind each of these options.
- (c) Jill Shepherd highlighted the reduction in the quality premium in relation to maximum four hour waits in A&E departments she mentioned that the HWB may be able to help with this.
- (d) Martin Jones mentioned that the HWB is responsible for the constitutional standards for Bristol, so that would be a good start.
- (e) It was agreed that partnership working was key to achieving the best outcome

Action: It was agreed that a report will be brought to the HWB's meeting on 21 October regarding Urgent Care plans

The chair thanked Bridget James for her report.

12. Better Care Fund Quarterly Data Collection

The Chair confirmed that this will be discussed at the next meeting.

ACTION: To be discussed at the HWB's meeting on 21 October 2015 – Kathy Eastwood to add to the work plan

13. Any Other Business

Becky Pollard commented that there is a Department of Health's consultation on public health in-year allocations. This relates to the proposed cuts to the local authority public health allocations 2015/16 (in-year savings). The Department of



Health consultation on the best way to implement these cuts across local authorities is currently running (further information can be found here https://www.gov.uk/government/consultations/local-authority-public-health-allocations-2015-to-2016).

ACTION: Becky Pollard to email the draft response to board members to give them an opportunity to comment. DONE

The meeting ended at 4.30pm			
	Chair		